ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1		11/27/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MH	920	12-07-01
RESPONSE FORMALITY REVIEW	M.D.	625	05-02-02

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim			Date										
Final	Original	9/22/01	12/4/02	3/24/02									
	1	✔	✔	✔									
	2			✔									
	3			✔									
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Claim		Date									
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If more than 150 claims or 10 actions
staple additional sheet here

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